

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation VOCES DE LA FRONTERA ACTION			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1027 S. 5TH STREET			
(c) City, State and ZIP Code <div style="display: flex; justify-content: space-between;"> MILWAUKEE WI 53204 </div>			3. FEC Identification Number <div style="border: 1px solid black; padding: 5px; display: inline-block;"> C C90011826 </div>
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report ☒ 24-Hour Report
☐ October 15 Quarterly Report ☐ 48-Hour Report
☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

FLORES, NANCY, NATALY, ,

FLORES, NANCY, NATALY, ,

10/22/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 7
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
VOCES DE LA FRONTERA ACTIONFull Name (Last, First, Middle Initial) of Payee
VALADEZ, JUANA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2541 N. FARWELL AVE

Amount

City State Zip Code
MILWAUKEE WI 53211

80.63

Transaction ID : F57.000001

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
TRUJILLO, JORELY, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 3711 W. HILDA PL.

Amount

City State Zip Code
MILWAUKEE WI 53215

40.50

Transaction ID : F57.000003

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
SEGURA, MERCEDES, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 8016 W. SCRANTON PLACE

Amount

City State Zip Code
MILWAUKEE WI 53218

90.75

Transaction ID : F57.000004

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 211.88

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

VOCES DE LA FRONTERA ACTION

Full Name (Last, First, Middle Initial) of Payee

RAMIREZ, BETHANIA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 3047 S. 8TH ST.

Amount

98.62

Transaction ID : F57.000005

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

PLASENCIA, NURY, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 1116 S. 33RD ST.

Amount

62.25

Transaction ID : F57.000006

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

PEREZ, ELIZABETH, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2419 S. 17TH ST.

Amount

16.88

Transaction ID : F57.000007

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

177.75

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 7
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
VOCES DE LA FRONTERA ACTIONFull Name (Last, First, Middle Initial) of Payee
ROWELL-ORTIZ, LIVIA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2605 S 6TH ST.

Amount

City State Zip Code
MILWAUKEE WI 53215

61.50

Transaction ID : F57.000009

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
ORNELAS, MARIA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2452 S. 31ST ST.

Amount

City State Zip Code
MILWAUKEE WI 53215

105.75

Transaction ID : F57.000010

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
MONTERO, DENIS, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2209 W. OKLAHOMA AVE.

Amount

City State Zip Code
MILWAUKEE WI 53215

75.38

Transaction ID : F57.000011

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 242.63

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 7
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
VOCES DE LA FRONTERA ACTIONFull Name (Last, First, Middle Initial) of Payee
LOZANO, ANDREA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address N1974 COUNTY RD. H

Amount

City State Zip Code
LAKE GENEVA WI 53147

69.75

Transaction ID : F57.000012

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
HERNANDEZ, OSCAR, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 3266 S. 12TH ST.

Amount

City State Zip Code
MILWAUKEE WI 53215

46.88

Transaction ID : F57.000013

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
HERNANDEZ, CRISTINA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2524 W. MITCHELL ST.

Amount

City State Zip Code
MILWAUKEE WI 53204

55.88

Transaction ID : F57.000014

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 172.51

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 7
FOR LINE 7 OF FORM 5NAME OF FILER (In Full)
VOCES DE LA FRONTERA ACTIONFull Name (Last, First, Middle Initial) of Payee
HARVEY, SHANA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y
10 / 21 / 2016

Mailing Address 2194 SHOREWOOD DR.

Amount

City State Zip Code
MILWAUKEE WI 53204

79.13

Transaction ID : F57.000015

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
CAMARILLO, RUTH, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y
10 / 21 / 2016

Mailing Address 830 E. LOCUST ST.

Amount

City State Zip Code
MILWAUKEE WI 53212

119.63

Transaction ID : F57.000016

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
CARDONA, SAMANTHA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y
10 / 21 / 2016

Mailing Address 3240 A. S 9TH ST.

Amount

City State Zip Code
MILWAUKEE WI 53215

78.75

Transaction ID : F57.000017

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 277.51

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 7
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

VOCES DE LA FRONTERA ACTION

Full Name (Last, First, Middle Initial) of Payee

CRUZ, WALESKA, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
10 / 21 / 2016

Mailing Address 2201 W. SUNBURY CT.

Amount

City State Zip Code
MILWAUKEE WI 53215

101.70

Transaction ID : F57.000018

Purpose of Expenditure
CANVASSERCategory/
Type 001Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

SPEEDWAY

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
10 / 22 / 2016

Mailing Address 907 W. GREENFIELD AVE.

Amount

City State Zip Code
MILWAUKEE WI 53204

100.00

Transaction ID : F57.000019

Purpose of Expenditure
GAS CARDS FOR VOLUNTEER CANVASSERS KNOCKING
DOORS FOR RUSS FEINGOLDCategory/
Type 002Office Sought: ☐ House State: WI
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
FEINGOLD, RUSS, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 201.70

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 1283.98
(carry total from last page forward to Line 7)